



Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

EFS ID:

11615

Application ID:

09681813

Title of Invention:

Finger-Fitting Pointing Device

First Named Inventor:

Francis Coghan

Domestic/Foreign Application:

Domestic Application

Filing Date:

null

Effective Receipt Date:

2001-06-09

Submission Type:

Utility Patent Filing

Filing Type:

new-utility

Confirmation Number:

0

Attorney Docket Number:

1043.001US1

cn=Michael Andrew Dryja, ou=Registered Attorneys, ou=Patent and

Digital Certificate Holder:

Trademark Office, ou=Department of Commerce, o=U.S.

Government, c=US

Certificate Message Digest:

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Total Fees Authorized:

\$355.0

Payment Category:

CC - Credit Card

Credit Card Number:

********1000

Expiration Date:

02282003

Card Holder Name:

Michael Dryja

RAM User ID:

EFSPROD

RAM Accounting Date:

2001-06-11

RAM Sequence Number:

298913

RAM Payment Status:

RAM success

Postal Code:

98074

TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 1043.001US1

Finger-Fitting Pointing Device

First Named Inventor: Mr. Francis F. Coghan IV

SUBMITTED BY

Name:

Michael Dryja

Registration Number:

39662

Electronic Signature Mark: Michael

Dryja

Date Signed: 20010609

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Attached Files:

bibd-transmittal

efsapds.xml

fee-transmittal

efsfee.xml

specification

001 spec.xml

declaration

DecPOA.tif

Attached Image File(s):

DecPOA.tif

Comments:

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As a below named inventor My residence/post office ad believe I am the original, are listed below) of the subj	ldress and of first and so ject matter	itizenship are as stat le inventor (if only o	one name is listed	below) or	r an original,		
Finger-Fitting Pointing Dev							
the specification of which is						11:	
() was med on _ Number		as US Applica and was amende	ation Seriai No. or d on	PCI III	manonai Apj (if applicable)	pheanon	
hereby state that I have re							the claims, as amende
any amendment(s) referred CFR 1.56.							
Foreign Application(s) and/or C	laim of Fore	gn Priority					
hereby claim foreign priority be have also identified below any for	nefits under 7	itle 35, United States Co					
COUNTRY	COUNTRY - APPLIC		DATE FILED		PRIORITY CLAIMED UNDER 35 U.S.C. 119		
						YES:	NO:
						YES:	NO:
Provisional Application					- ' '		
hereby claim the benefit under T	itle 35, United	States Code Section 119	(e) of any United State	es provision	al application(s)	listed below:	,
,	•	APPLICATION SE	RIAL NUMBER	FILD	NG DATE		
		1					
hereby claim the benefit under T claims of this application is not di acknowledge the duty to disclose prior application and the national APPLICATION SERIAL N	sclosed in the material infor or PCT interna	prior United States appli mation as defined in Titl	cation in the manner p e 37, Code of Federal application:	rovided by	the first paragrap s, Section 1.56(a	oh of Title 35, a) which occur	United States Code Section
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POWER OF ATTORNEY: As a named inventor, I hereby a frademark Office connected there	ppoint the fol with. Dryja, Reg. !		r agent(s) listed below		ute this applicat	ion and transa	act all business in the Pater
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### In							
hereby declare that all statement hat these statements were made w if Title 18 of the United States Co	ith the knowl de and that su	edge that willful false sta ch willful false statement	tements and the like so	made are	ounishable by fin	e or imprison	ment, or both, under Section
ull Name of Inventor: Francis	F. Coghan IV	<u> </u>			Citizenship	: <u>US</u>	
Residence: <u>12840 Saratoga Rd.</u>	Apple Valley	CA US 92308				•	
ost Office Address: Same						·	
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nventor's Signature	July Her		Date	6	5 1001	- ""	

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FEE TRANSMITTAL

Electronic Version 1.0.4 Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 355

BANK (CREDIT) CARD INFORMATION:

Credit Card Number:

1000

Expiration Date:

20030228

Authorized Name:

Michael Dryja

Billing Address:

98074

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid	
Utility Filing Fee	201	\$ 355	

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 20	203	\$ 9	0	\$ 0
Independent Claims: 3	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0